



PATENT
Atty. Dkt. No. 054707-1225

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE



Applicants: Gregory S. HAMILTON et al.

Title: N-LINKED SULFONAMIDES OF N-HETEROCYCLIC CARBOXYLIC ACIDS OR CARBOXYLIC ACID ISOSTERES

Prior Appl. No.: 09/791,660

Prior Appl. Filing Date: 02/26/2001

Prior Examiner: C.C. Chang

Prior Art Unit: 1625

CONTINUING PATENT APPLICATION
TRANSMITTAL LETTER

Mail Stop PATENT APPLICATION
Commissioner for Patents
PO Box 1450
Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is a:

Continuation Division Continuation-In-Part (CIP)

of the above-identified copending prior application in which no patenting, abandonment, or termination of proceedings has occurred. Priority to the above-identified prior application is hereby claimed under 35 U.S.C. § 120 for this continuing application. The entire disclosure of the above-identified prior application is considered as being part of the disclosure of the accompanying continuing application and is hereby incorporated by reference therein.

Applicant claims small entity status under 37 CFR 1.27.

Enclosed are:

- Application Data Sheet (37 CFR 1.76) (3 pages).
- Preliminary Amendment (12 pages).
- Specification, Claims, and Abstract (87 pages).
- Formal drawings (3 sheets, Figures 1-3).
- Copy of Declaration and Power of Attorney (4 pages).

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The filing fee is calculated below:

	Claims as Filed	Included in Basic Fee	Extra Claims	Rate	Fee Totals
Basic Fee				\$750.00	\$750.00
Total Claims:	14	- 20	= 0	x \$18.00	= \$0.00
Independents:	4	- 3	= 1	x \$84.00	= \$84.00
If any Multiple Dependent Claim(s) present:			+ \$280.00	= \$0.00	
			SUBTOTAL:	=	\$834.00
[X]		Small Entity Fees Apply (subtract ½ of above):		=	\$417.00
			TOTAL FILING FEE:	=	\$417.00

[X] A check in the amount of \$417.00 to cover the filing fee is enclosed.

[X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date 6/24/13 By Sue Chong (45,943)
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